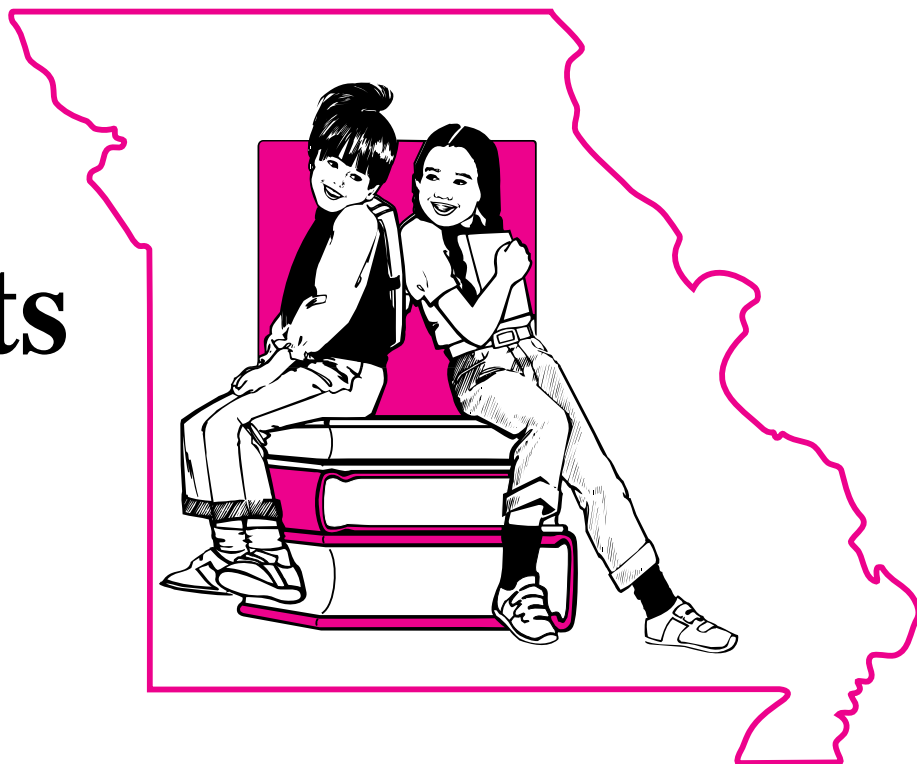


# **Tobacco Use Among Missouri Middle School Students**



Missouri Department of Health

Division of Chronic Disease Prevention  
and Health Promotion

Bureau of Health Promotion

## ***Tobacco Use Among Missouri Middle School Students 1999***

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## Acknowledgements

This report could not have been possible without the contributions of the following:

The students, administrators, and staff from selected middle schools who participated in the 1999 Missouri Middle School Health Survey;

The Centers for Disease Control and Prevention (CDC), Office on Smoking and Health, for tabulating and analyzing the Missouri Middle School Health Survey;

The Missouri Department of Elementary and Secondary Education for providing assistance with the Missouri Middle School Health Survey and for providing data from the 1999 Youth Risk Behavior Survey;

and, Jim McDonald, M.A., for doing the graphics and layout.

# Foreword

**T**his report focuses on child and adolescent use of tobacco. Unfortunately, many of Missouri's youth begin to experiment with smoking cigarettes and cigars or dipping and

chewing smokeless tobacco products long before they are able to do so legally—some as early as age eight! Each day thousands of young people experiment with smoking and may become “hooked,” as they are

unaware of the addicting nature of tobacco. Consequently, they join the ranks of millions of Missourians who are at risk for smoking-related diseases, including heart attack, stroke, cancer, emphysema,

and asthma. Since few people begin to smoke after age 18, communities need to take action to fight the “war on tobacco” in order to save their most precious resource—the health of their children.

## Consider:

✓Youth are pressured to smoke at early ages from a variety of sources—within the home, in the neighborhood, at school, on TV, in movies and video games. Communities need to promote strong “no smoking” environments for youth.

✓Tobacco is often the first drug used by young people. Use of alcohol, marijuana and other drugs is lower among non-smokers.

✓Many adolescents who smoke are addicted to nicotine and are unable to quit, despite a desire to do so. Programs to help adolescents quit smoking are needed as much as programs to prevent smoking.

It is the goal of the Division of Chronic Disease Prevention and Health Promotion to effectively reduce the prevalence of tobacco use by youth in the state. This monograph summarizes the results of the most recent assessment of this critical health-risk behavior. From this data, we anticipate that effective strategies and interventions will be developed to win this war on tobacco.



Bernard R. Malone, M.P.A., Director  
Division of Chronic Disease Prevention and  
Health Promotion

Missouri Department of Health

# Introduction

**A**larmingly, one-half of Missouri middle school students have used some form of tobacco during their lifetime and almost one-third smoked a whole cigarette before the age of 13 (1). Missouri's high school student tobacco-use prevalence rates exceed those of the nation (2). This report summarizes the findings of self-reported tobacco-use behaviors among adolescents in grades six through twelve and young adults ages 18-24 in Missouri during 1998 and 1999. The results indicate that additional tobacco-use prevention and cessation efforts focused on adolescents are needed in Missouri. This information should also be used to promote additional policies and stronger laws.

Among U.S. young people ages 12-17, the incidence of first cigarette use increased by 30% from 1988 to 1995 (3). Approximately 80% of tobacco use occurs for the first time among youth under age of 18 (4). More than 6,000 young people under age 18 try a cigarette each day and more than 3,000 young people each day become daily smokers (3). If current patterns of smoking behavior persist, an estimated five million U.S. people who were aged 0-17 years old in 1995 could die prematurely from smoking-related illnesses (5).

Tobacco use is considered the single leading preventable cause of death in the United States, and the risk for smoking-attributable disease increases the earlier in life smoking begins (6,7). It has been well established that cigarette smoking is responsible for heart disease; cancers of the lung, larynx, mouth, esophagus, and bladder; stroke; and emphysema and asthma (4). Cigar smoking has been associated with cancers of the mouth, larynx, esophagus, lung, and with emphysema and asthma (8). Additionally, smokeless tobacco has been associated with oral cancer, tooth and gum disease, and cardiovascular disease (4).

In Missouri, heart disease, cancer, and chronic pulmonary disease were responsible for 32,980 deaths, or 60 percent of all deaths, in 1997 (9). By preventing the initiation of tobacco use among Missouri adolescents, tobacco-related deaths would be substantially reduced.

# Data Sources

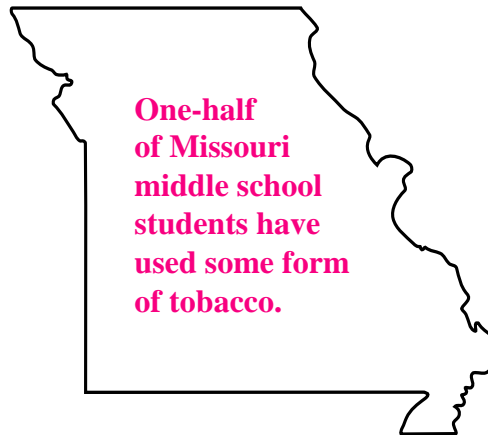
Data reported in this monograph were obtained from three sources—the 1999 Missouri Middle School Health Survey (MSHS), the 1999 Missouri Youth Risk Behavior Survey (YRBS), and the 1998 Behavioral Risk Factor Surveillance System (BRFSS). Analysis of all data presented in this report was done by staff of the U.S. Centers for Disease Control and Prevention (CDC).

The MSHS was conducted during the spring of 1999 by the Missouri Department of Health, Division of Chronic Disease Prevention and Health Promotion in collaboration with the Missouri Department of Elementary and Secondary Education and the CDC Office on Smoking and Health. 1,528 randomly selected students in grades six through eight from 41 randomly selected public middle schools participated in the survey. Student participation was confidential and anonymous. The school response rate was 83.7% and the student response rate was 87.6%. Sufficient school and student responses were obtained to allow inferences to be made about the tobacco use of all Missouri public middle school students in grades six through eight. Data are presented only by grade and gender because the number of minority students in the sample was too small for meaningful analysis.

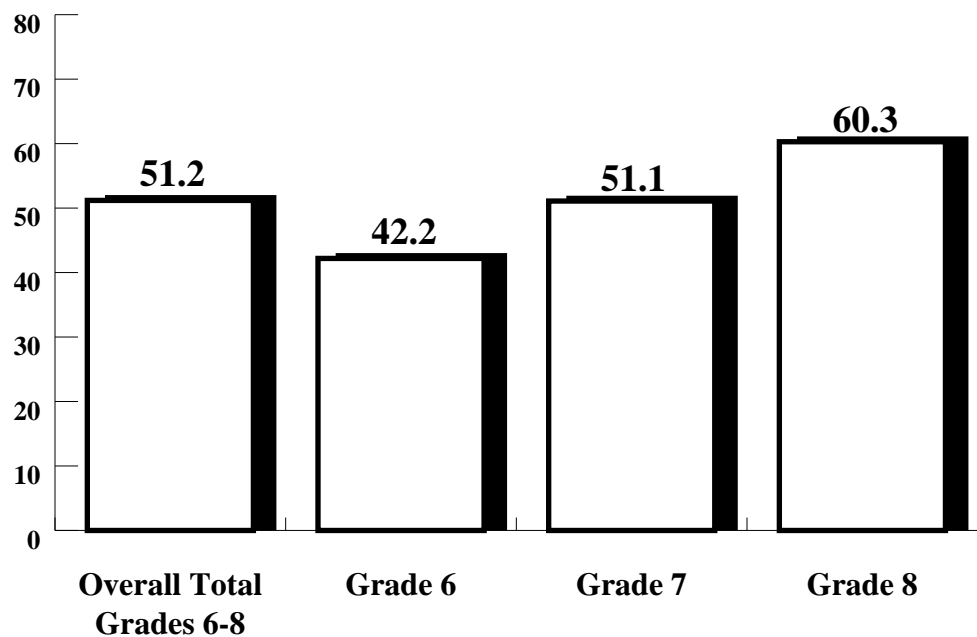
The Missouri Department of Elementary and Secondary Education HIV Prevention Education Program conducted the YRBS during the spring of 1999 in collaboration with the CDC Division of Adolescent and School Health. 1,652 randomly selected students in grades nine through twelve from 23 randomly selected public high schools participated in the survey. The school response rate was 77 percent and the student response rate was 80 percent. Sufficient school and student responses were obtained to allow inferences to be made about the tobacco use of all Missouri public high school students in grades nine through twelve.

The Missouri Department of Health, Division of Chronic Disease Prevention and Health Promotion conducted the BRFSS during 1998. The BRFSS is a random telephone survey of adults age 18 and older. In 1998, there were 3,720 completed BRFSS interviews.

# Lifetime Tobacco Use



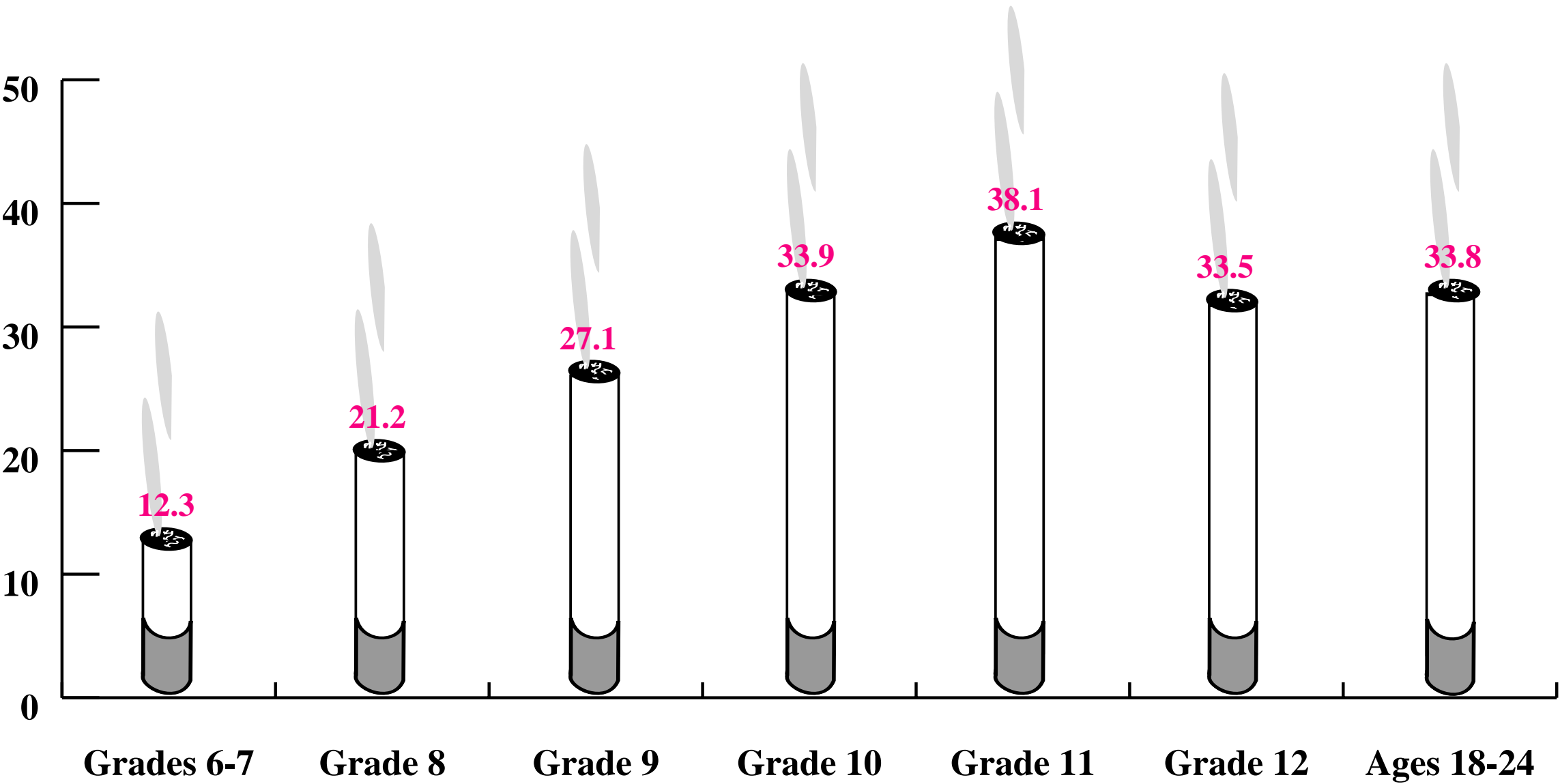
*The percentage of Missouri middle school students who had ever used any form of tobacco, by grade:*



- **47.5** percent of Missouri middle school students had ever tried cigarette smoking, even one or two puffs.
- **24** percent of Missouri middle school students had ever tried smoking cigars, cigarillos, or little cigars, even one or two puffs.
- **14.7** percent of Missouri middle school students had ever used chewing tobacco, snuff, or dip.

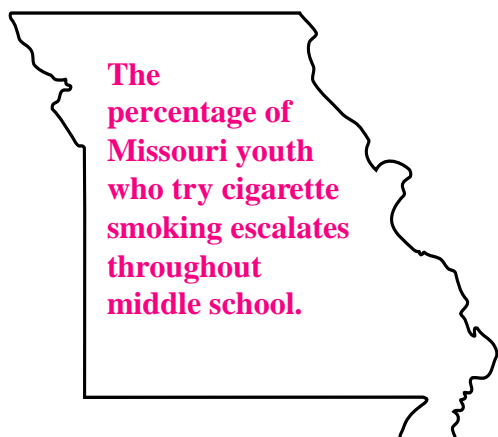
# C u r r e n t C i g a r e t t e S m o k i n g

The percentage of Missouri middle school, high school, and young adults who smoked cigarettes on one or more of the past 30 days

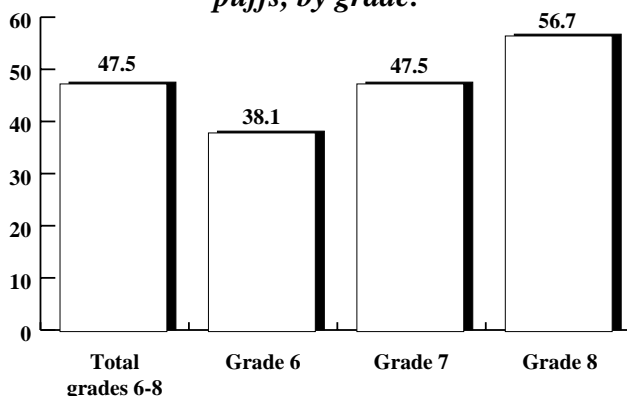




# Lifetime Cigarette Use

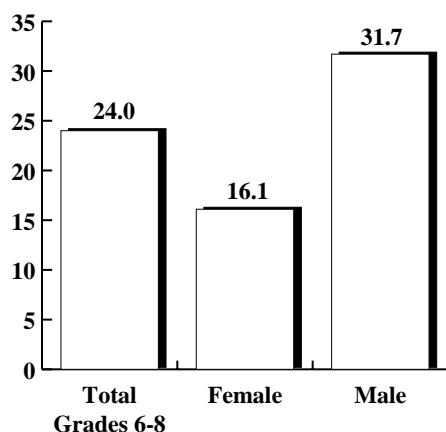


*The percentage of Missouri middle school students who ever tried cigarette smoking, even one or two puffs, by grade:*



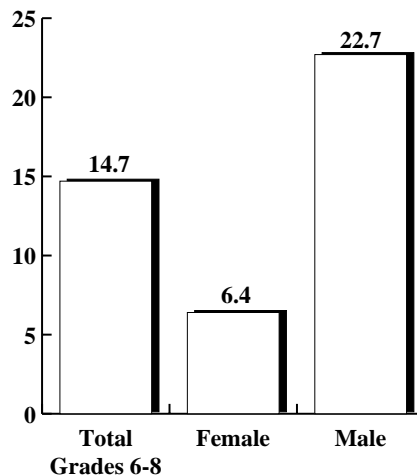
# Lifetime Cigar Use

*The percentage of Missouri middle school students who ever tried smoking cigars, cigarillos, or little cigars, even one or two puffs, by gender:*



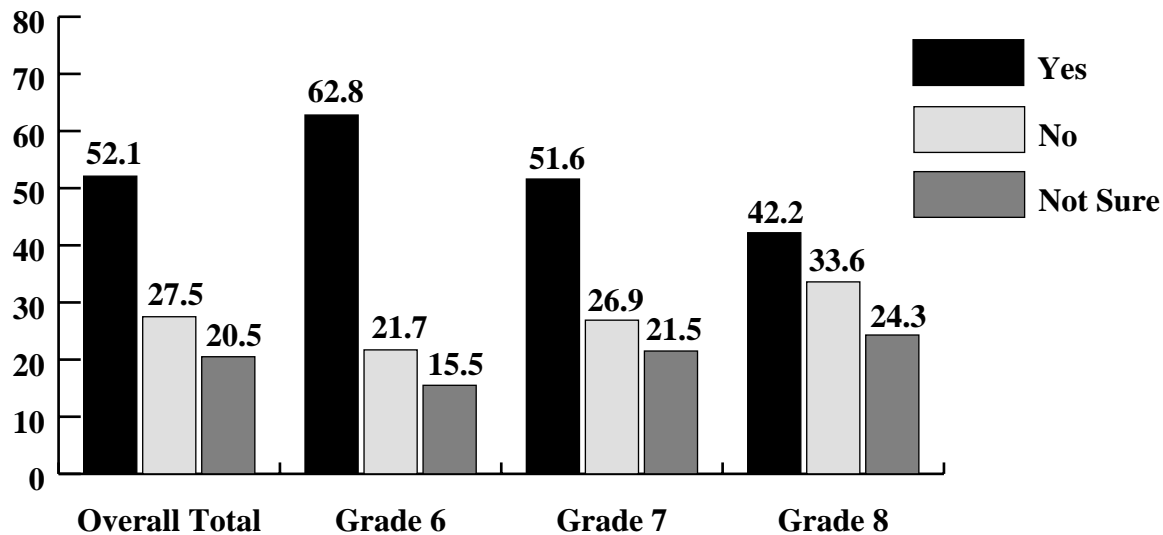
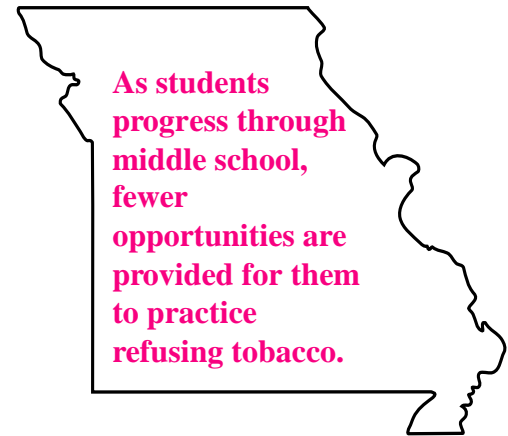
# Lifetime Smokeless Tobacco Use

*The percentage of Missouri middle school students who ever used chewing tobacco, snuff, or dip, by gender:*



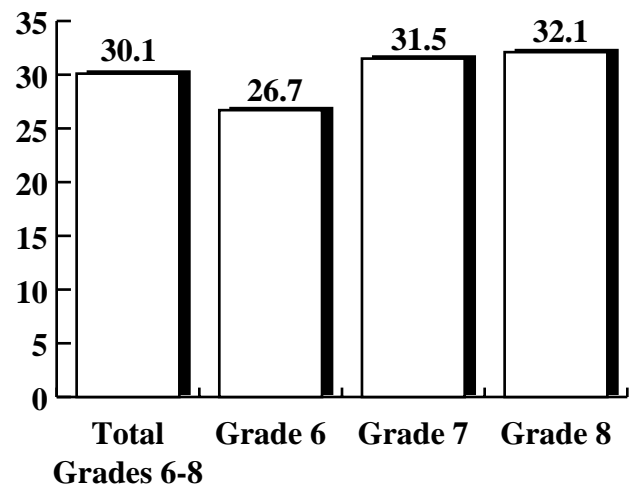
# Learning To Say No To Tobacco

*The percentage of middle school students who had practiced ways to say no to tobacco in any of their classes during the school year:*

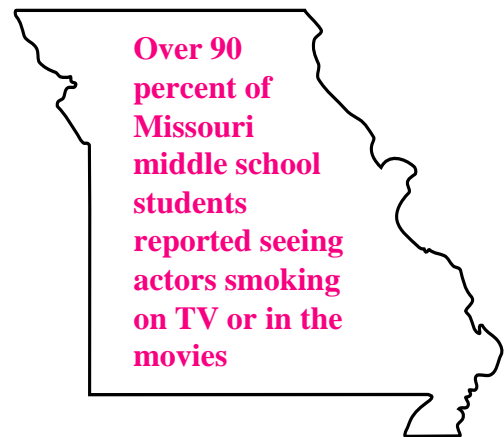
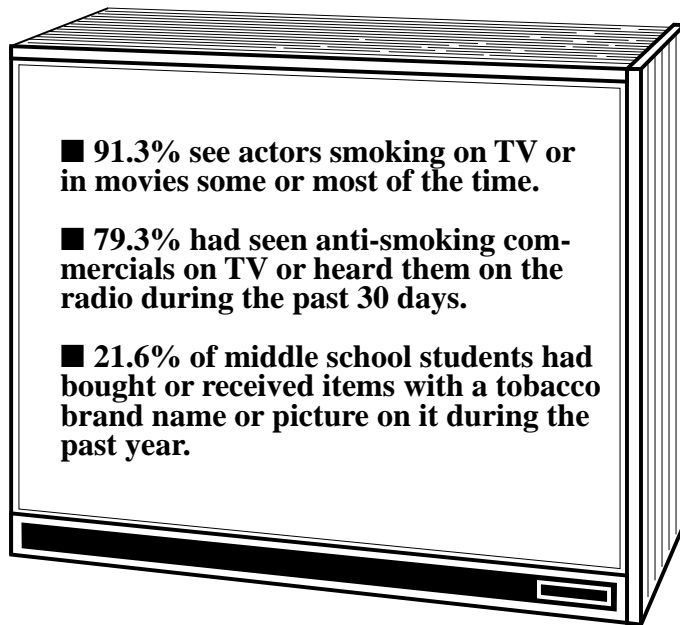


# First Cigarette Use


*Percentage of Missouri middle school students who smoked a whole cigarette for the first time before the age of 13 by grade:*

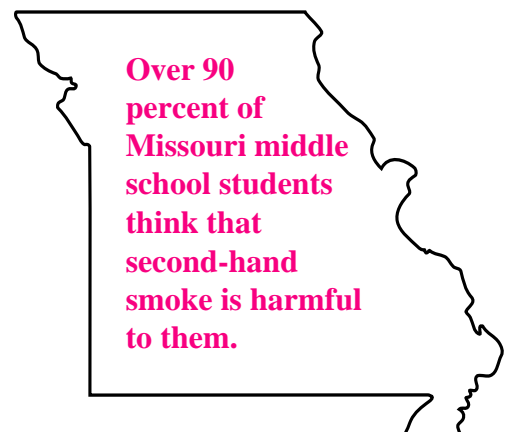


# Marketing and Media Influences

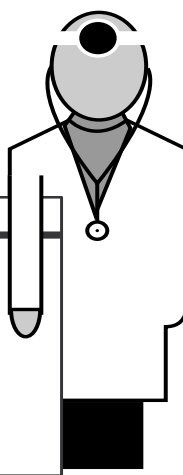


## Environmental Tobacco Smoke

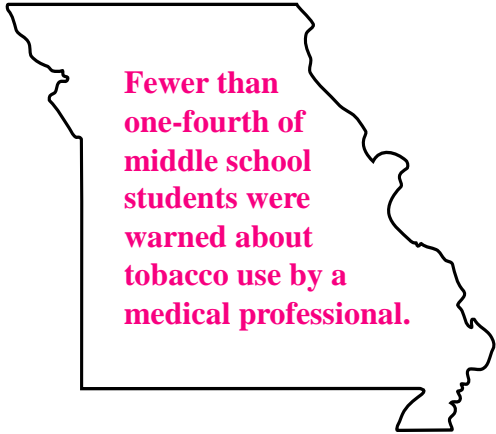
- 
- 48.9% of Missouri middle school students live with someone who smokes cigarettes
  - 93.8% of Missouri middle school students think the smoke from other people's cigarettes is definitely, or probably, harmful to them.



# Warnings About Tobacco Use By Medical Professionals



	Yes	No	No Visit
Doctor	24.2	58.8	17.0
Dentist	17.2	67.3	15.6



Fewer than one-fourth of middle school students were warned about tobacco use by a medical professional.

*Percentage of Missouri middle school students who had someone in a doctor or dentist office talk with them within the past 12 months about the dangers of tobacco use.*

## Peer Influence

32 percent of Missouri middle school students have one or more close friends who smoke cigarettes.



# Prevention Efforts in Missouri

**M**issouri has coalitions in St. Louis, Kansas City, Northeast Missouri, Northwest Missouri, Southeast Missouri, Southwest Missouri, Boone County, and Jefferson City, as well as the Bootheel Heart Health Coalition, that

work with statewide and regional agencies and associations to conduct tobacco-use prevention activities. These activities include working to create and enforce public policies including minors' access to tobacco, reducing tobacco companies'

advertising and sales to youth, and reducing exposure to second-hand tobacco smoke in an effort to reduce tobacco use. Education through media and policy initiatives are a part of every activity. Local coalitions work in collaboration with community groups and

health care organizations such as the American Cancer Society, American Lung Association, Community 2000 groups, and local public health associations.

## Why Prevention Efforts Must Continue in Missouri

### Reason #1:

One-half of Missouri middle school students have used some form of tobacco during their lifetime.

### Reason #2:

The percentage of Missouri youth who try cigarette smoking escalates throughout middle and high school.

### Reason #3:

As students progress through middle school, fewer opportunities are provided for them to practice refusing tobacco.

### Reason #4:

Over 90 percent of Missouri middle school students reported seeing actors smoking on TV or in the movies.

### Reason #5:

Fewer than one-fourth of middle school students who had visited a medical professional within the past year had someone in the office warn them about tobacco use.

### Reason #6 to #208,831:

That is the total number of Missouri middle school students whose health could be compromised by the use of tobacco.

For further information, contact:  
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kivetb@mail.health.state.mo.us  
www.state.health.mo.us  
—click on Prevention & Wellness  
—click on Smoking & Tobacco

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